

MICHIGAN DEPARTMENT OF NATURAL RESOURCES FOREST, MINERAL AND FIRE MANAGEMENT DIVISION

APPLICATION TO WITHDRAW LAND FROM THE MICHIGAN COMMERCIAL FOREST (CF) PROGRAM

| FOR DNR USE ONLY | | | | | |
|------------------|----------|--|--|--|--|
| WD Number | Owner ID | | | | |
| | | | | | |
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Required by authority of Section 51108, Part 511 of 1994 PA 451, as amended **NOTE:** This withdrawal application MUST be typed or printed, signed by all owners, and notarized.

| PRIMARY OWNER (Where official correspondence should be sent.) | | | | | | | | | |
|---|--|------------------------|---|----------------------|------------------------|-----------|-----------------|--|--|
| I (we) hereby apply to withdraw the lands described on Page 2 of this document from the CF program. | | | | | | | | | |
| Name: | | | Address: | | | | | | |
| City, State & Zipcode: | | | Work Telephone Number: | | Home Telephone Number: | | | | |
| | | | () | | () | | | | |
| | ALL ADDITIONAL OWNERS (Attach additional sheets if necessary.) | | | | | | | | |
| Name: | | (7 maon adamenare | Name: | •1 | | | | | |
| Address: | | | Address: | | | | | | |
| Address. | | | | | | | | | |
| City, State & Zipcode: | | City, State & Zipcode: | | | | | | | |
| Work Telephone Number: | Home Telephone | Number: | Work Telephone Number: Home Telephone Number: | | Number: | | | | |
| () | () | | () | | (|) | | | |
| Name: | | | Name: | | | | | | |
| Address: | Address: | | | Address: | | | | | |
| City, State & Zipcode: | | | City, State & Zipcode: | | | | | | |
| Work Telephone Number: | Home Telephone | Number | Work Telephone | Number | Homo - | Геlephone | Number | | |
| () | () | inumber. | () | Number. | (|)) | Number. | | |
| | | 3. POWER OF ATTO | DRNEY (If applicab | ole.) | | | | | |
| I have Power of Attorney for the owner | r(s) on this | County | State | Recorded Date | Liber | Page | Expiration Date | | |
| application as recorded at the County | Register of | | | | | | | | |
| Deeds shown to the right: Power of Attorney Name: | | | Telephone Numb | er. | | | | | |
| Tower of Attorney Name. | | () | | | | | | | |
| Address: | | | Power of Attorney Signature: | | | | | | |
| City, State & Zipcode: | | | Date: | | | | | | |
| | | | | | | | | | |
| _ | 4. | EVIDENCE OF OW | NERSHIP (If applic | able.) | | | | | |
| Attached is a copy of the deed o | r land contract that | evidences my owner | rship of the land to | be withdrawn from th | e CF pro | gram. | | | |
| | | 5. WITHDRAWAL | | E | | | | | |
| A withdrawal application fee must be s | | | l as shown below: | | | | | | |
| 200 acres or less being withdrawn | • • • | | | | | | | | |
| 201 acres to 1,000 acres being withdrawn - withdrawal application fee = \$1.00/acre withdrawn up to a maximum fee of \$1,000.00 (see examples below): 1. 201 acres = \$201.00 2. 250 acres = \$250.00 3. 500 acres = \$500.00 4. 750 acres = \$750.00 | | | | | | | | | |
| 5. 1,000 acres = \$1,000.00 | | | | | | | | | |
| Over 1,000 acres being withdrawn - withdrawal application fee = \$1,000.00 | | | | | | | | | |
| 6. WITHDRAWAL APPLICATION FEE STATEMENT | | | | | | | | | |
| I (we) hereby apply to withdraw net acres from the program. I (we) also submit a withdrawal application fee of | | | | | | | | | |
| for this acreage pursuant to Section 51108(2) of the CF statute. Attached is a check or money order for this amount made payable to the "STATE OF | | | | | | | | | |
| MICHIGAN" (DO NOT send cash). | | | | | | | | | |

| | CALCULATION |
|--|-------------|
| | |

Upon receipt of your application, the DNR will calculate the withdrawal penalty as required by Section 51108(3)-(4) of the CF statute. The penalty will be calculated using current ad valorem property tax information provided to the DNR by the local government. Numbers used in the following example are provided only to assist the applicant in understanding how the withdrawal penalty will be calculated and may not be relied upon as an accurate reflection of your withdrawal penalty. Parcel County Township Town Range Section Listing Case No Net Acres 89-00 Harris 38N 25W 25 40.0 Menominee Legal Description: SE 1/4 of NE 1/4 Parcel No: \$30,576.52 5,365.03 \$1,595.78 Total Taxes Levied on Total # of TCC* # of Acres Being Years Listed (1-15) Withdrawal Penalty Acres in Twp. Withdrawn TCC* Acres in Twp. *TCC - Timber cutover general property tax classification EGAL LAND DESCRIPTION(S) Note: Net acres includes easements, but not rights-of-way or land owned in fee title by others. Section Listing Case No. County Township Town Range Net Acres Legal Description: Parcel No: FOR DNR USE ONLY Total Taxes Levied on Total # of TCC' # of Acres Being Withdrawal Penalty Years Listed (1-15) Acres in Twp. Withdrawn TCC* Acres in Twp. County Township Town Range Section Listing Case No Legal Description: Parcel No: FOR DNR USE ONLY Total Taxes Levied on Total # of TCC* # of Acres Being Years Listed (1-15) Withdrawal Penalty Withdrawn Acres in Twp. TCC* Acres in Twp. Township Town Section Listing Case No. Net Acres County Range 3 Legal Description: FOR DNR USE ONLY Parcel No: Total Taxes Levied on Total # of TCC* # of Acres Being Years Listed (1-15) Withdrawal Penalty Withdrawn Acres in Twp. TCC* Acres in Twp. County Township Town Range Section Listing Case No. Net Acres Legal Description: FOR DNR USE ONLY Parcel No: Total Taxes Levied on Total # of TCC* # of Acres Being Withdrawal Penalty Years Listed (1-15) Withdrawn TCC* Acres in Twp. Acres in Twp.

| 8. CERTIFICATION OF WITHDRAWAL APPLICATION (ALL owners must sign in presence of notary.) I hereby certify, that to the best of my (our) knowledge and belief, the foregoing statements are true and correct and I (we) hereby apply to have these lands withdrawn from the Commercial Forest program. | | | | | | | |
|---|---------------------|--|---------------|--|--|--|--|
| Signed on this day of, 20 at (City) (State) | | | | | | | |
| ☐ Primary Owner or ☐ Power of Attorney Signatu | re | Date: | | | | | |
| SIGNATURES OF ADDITIONA | AL OWNERS (ALL O | WNERS MUST SIGN IN PRESENCE OF NOTARY.) | | | | | |
| 1. | Date: | 2. | Date: | | | | |
| 3. | Date: | 4. | Date: | | | | |
| | 9. NOTAI | RY PUBLIC | | | | | |
| STATE OF MICHIGAN (or STATE OF | |), County of | : | | | | |
| On this day of, 20 before me the undersigned notary public within and for the said county did | | | | | | | |
| personally appear | | | | | | | |
| Owner Name(s) | | | | | | | |
| | | | | | | | |
| to me known to be the same person(s) who executed the | foregoing instrumen | t and who acknowledged the same to be (his/her/their) free | act and deed. | | | | |
| NOTARY BLOCK (Please Type or Prin Name: | | | | | | | |
| Signature: | | | | | | | |
| orginatore. | | | | | | | |
| My Commission Expires: Office Telephone | Number: | | | | | | |
| Address: | | | | | | | |
| City, State & Zipcode: | | | | | | | |

10. SUBMITTAL INFORMATION

Please send your check or money order made payable to the "STATE OF MICHIGAN" along with this completed application to:

COMMERCIAL FOREST WITHDRAWALS FOREST, MINERAL AND FIRE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF NATURAL RESOURCES PO BOX 30452 LANSING MI 48909-7952

If you have questions please contact our office at (517) 373-1275.

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